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Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

## UNITED STATES DISTRICT COURT

for the

Eastern District of Michigan

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Case: 1:22-cv-12024

Judge: Ludington, Thomas L.

MJ: Morris, Patricia T.

Filed: 08-26-2022

CMP ADZIMA VS ST. MARY'S RIVER

REAL ESTATE ET AL (DP)

Alicia Adzima

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Jury Trial: (check one) ☒ Yes ☐ No

-v-

St. Marys River Real EstateAndrew Alshab

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Alicia Adzima

Street Address

213 Brady St. Apt #1

City and County

Sault Sainte Marie, Chippewa

State and Zip Code

49783 49783

Telephone Number

734.865.8521

E-mail Address

aliadzima@icloud.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

## Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

## Defendant No. 1

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Doctor for Pain Management  
 5410 Ashmun Street  
 Sault Sainte Marie  
 Sault Sainte Marie, MI 49783  
 906. 632. 8440  
 dobaislaw@sbcglobal.net

## Defendant No. 2

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Andrew Alshab  
 Dr. Andrew Alshab  
 14523 S. Water Tower Dr.  
 Kincheloe, MI  
 Michigan, 49788  
 906. 632. 5849  
 906. 203. 7877

## Defendant No. 3

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Andrew Alshab  
 Doctor, Landlord - Property Owner  
 500 Osborn Blvd.  
 Sault Sainte Marie  
 MI 49783  
 906. 233. 7877

## Defendant No. 4

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (check all that apply)



Federal question



Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

**A. If the Basis for Jurisdiction Is a Federal Question**

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

42 U.S.C. §§ 3601 et seq. F.H.A of 1988  
 42 U.S.C. §§ 1997 et seq. Civil Rights  
 42 U.S.C. §§ 12101 et seq. A.D.A Act of 1990

**B. If the Basis for Jurisdiction Is Diversity of Citizenship****1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, (name) Alicia Marie Adzima, a citizen of the  
 State of (name) Michigan.

**b. If the plaintiff is a corporation**

The plaintiff, (name) \_\_\_\_\_, is incorporated  
 under the laws of the State of (name) \_\_\_\_\_,  
 and has its principal place of business in the State of (name) \_\_\_\_\_.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

**2. The Defendant(s)****a. If the defendant is an individual**

The defendant, (name) Andrew Alshab, is a citizen of  
 the State of (name) Michigan. Or is a citizen of  
 (foreign nation) \_\_\_\_\_.

b. If the defendant is a corporation

The defendant, (name) Andrew Ashab, is incorporated under the laws of the State of (name) Michigan, and has its principal place of business in the State of (name) Michigan. Or is incorporated under the laws of (foreign nation) \_\_\_\_\_, and has its principal place of business in (name) Michigan.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain):

Personal injury, ADA laws, Fair Housing Act of 1988, Civil Rights of I. P. Act, title II of 504, Grievous Harm, Housing accommodations, Slander, Liebl. and assault. Other personal injury.

### III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

Andrew Ashab has been discriminatory towards my disabilities, childrens autism, has been allowing us to reside in a house not up to local law code. Mr. Ashab has harassed me, slandered my reputation, and has not done anything to help my kids and I.

### IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Pain, suffering, liebel, personal injury, housing discrimination, violation of my civil rights. Housing has been not up to code, all my landlord has done is; has been discriminatory, and caused so much pain, suffering.

**V. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

08/26/2022

Signature of Plaintiff

Alicia Marie Adema

Printed Name of Plaintiff

Alicia Marie Adema**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Name of Law Firm \_\_\_\_\_

Street Address \_\_\_\_\_

State and Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_